CHILDREN'S SYSTEMS OF CARE MHSA NEWSLETTER

MHSA Under Scrutiny



An extensive audit, performance and outcome review of Mental Health Services Act (MHSA) programs has been requested by Senator Darrell Steinberg. The audit will be conducted by the California State Auditor and is scheduled to begin within the next few weeks.

Programs under MHSA provide comprehensive help for tens of thousands of Californians with severe mental illness, while also providing outreach, prevention, and early intervention for those in the early stages of mental illness. Questions recently raised about the effectiveness of some programs

An extensive audit, performance and outcome review of Mental Health Services Act (MHSA) programs request the audit and performance outcome review.

"The audit shouldn't be limited in any way but I request a particular focus on performance outcomes. Let's have the impartial and thorough Auditor dissect this Act," Steinberg stated.

"We promised the people of California that Proposition 63 would have an impact in reducing homelessness and jail time, increasing employment, and improving people's lives. In my view, one thing the Act hasn't done well is commit itself to perform outcome evaluations for all parts of the

Act

Rather than wait for that to happen, I want the Auditor to step in. I'm confident it will be positive, but where there are problems, criticisms or flaws; tell us that as well so we can improve services for those who suffer from mental illness"

California State Auditor Elaine Howle has indicated that such an audit will be extensive, with two teams visiting and gathering information from state agencies as well as four representative counties, including Los Angeles County. She said the audit will not just examine how the funding is being allocated and used, but what outcomes the counties are achieving in the five areas of services and supports specified in the MHSA.

The audit will examine the data collected by counties, how that data is analyzed and used to determine the effectiveness of programs, and how that data is used to modify and improve the programs. Howle said her teams will test expenditures to make sure they are reasonable and allowed under the provisions of MHSA, while also examining how stakeholders are involved in developing programs at the local level.

"This is a one billion dollar pro-

gram and many Californians need help," said Steinberg. "The Act is helping a lot of people but a lot of questions are being raised as well. Let's be an open book and answer those questions."



Inside this issue:

11 13100 11 113 13300.	
New Program Head	2
Melanie's Story	2
PEI Library Project	3
Flex Funds Quiz	4
Data Comparison	4

Robert Byrd New CW Program Head

Robert Byrd, Psy.D. has assumed the role of Program Head of the County-wide Child MHSA Program Administration Unit following the transfer of Dina Dutton to San Fernando Valley Mental Health Center this past summer.

Dr. Byrd has gained a wealth of experience during his tenure with the MHSA Implementation Unit and from his responsibilities in the development and implementation of countywide Prevention and Early Intervention (PEI) programs, Evidence Based Practices (EBP)s and service strategies.

In addition to the public mental health system, Dr. Byrd possesses extensive administrative and clinical experience in the private sector as a Clinic Coordinator at St. John's Child and Family Developmental Center and Best Practices Coordinator at Didi Hirsch where he developed state-of-the-art clinics and programs for special populations.

While serving as a Program Head for Family and Community Partnership Unit, Dr. Byrd not only assumed responsibility for planning, organizing and directing all programs related to Birth to Five, School Mental Health, and multiple countywide PEI initiatives such as the PEI Library Project featured in this newsletter, but over 25 Evidence Based programs as well.

Children's Systems of Care (CSOC) Administration is very pleased to welcome Dr. Byrd to the CSOC Administration family.



Robert Byrd, Psy.D.



Melanie's Success Story

Melanie was nine years old when her mother died of breast can-

cer and being the only daughter and the youngest of three children, the loss of her mother was devastating. Angry and alone, Melanie turned to drugs and local gang members for comfort and friendship.

By the time she was 12 and enrolled in St. John's Field Capable Clinical Services (FCCS) Program, Melanie had been expelled from school and was having trouble with the law. Melanie's father was so concerned and overwhelmed that he remembers this period of time as "chaos."

Despite her participation in the FCCS program and being linked to Big Brothers/Big Sister of Greater Los Angeles, Melanie's behaviors remained unchanged. At her new middle school, Melanie was suspended on various occasions for fighting and allegedly selling drugs. Even though she continued to miss school and her grades were poor, her father and FCCS therapist refused to give up on her. They remained committed to finding a treatment plan that worked. Melanie's father requested an Individualized Educational Plan evaluation to find out why Melanie was angry and felt "stupid." which revealed that Melanie had poor reading, language, and math skills. Melanie needed all the help she could get, and her teachers were up for the challenge. Once her teachers

began showing an interest in Melanie, she began to change. She stopped using drugs and attended school daily. In her individual sessions, Melanie was more honest and made the connection between her choices and their consequences.

Today Melanie's future looks promising. She graduated from middle school. She is interested in pursuing a career in nursing to help others. "Counseling has given me support and helped me to realize that it is up to me to change my life, plan for my future and control things like my anger and sadness." Melanie's father couldn't agree more, "she is calmer and less angry...She understands things better and is willing to talk about it."

The PEI Library Project

By: Maria Vargas

Under the direction of District Chief, Sam Chan, DMH's Family and Community Partnerships Unit has entered into a partnership with Los Angeles County Public Libraries (CPL) to administer and deliver prevention services throughout Los Angeles County.

Muriel Cormier, LCSW is the Project Lead for this new and innovative Mental Health Parenting Program (MHPP) which offers a robust array of family-centric programs designed to cultivate a love of learning, unite families and provide early detection and management of child behavior problems.

The goal of this novel partnership is to offer opportunities for parents to strengthen both their parenting skills and their relationships with their children through three distinctive programs: Triple P (Positive Parenting Program) Family Place, and Parent Cafés.

By July 2013, The Triple P program, which draws on Social Learning, Cognitive-Behavioral and Developmental theories, will be offered at 50 libraries throughout Los Angeles County.

Triple P is a multi-level parenting program that assists parents/caregivers with a specific concern about their child's behavior. The program promotes social competence and emotional regulation, while maintaining reasonable expectations and placing an emphasis on a positive parentchild relationship while taking care of oneself as a parent.

Triple P trained librarians promote parental selfsufficiency, increased parental effectiveness and





enhanced problem solving skills.

Family Place is an efficient and helpful program that introduces caregivers and their children ages birth to 4 to early reading in a friendly and interactive environment where play is recognized as a critical component of school readiness.

Currently, there are 40
Family Place programs
throughout Los Angeles
County library system.
These library centers offer

early childhood information, parent education, emergent literacy, socialization and family support.

Family Place is a five week parent/child workshop which builds on the knowledge that good health, early learning, parent involvement, and supportive communities play an essential role in young children's growth and development.

The workshops feature local professionals, such as nutritionists, speech and language therapists and child development experts, who serve as resources



for parents.

The third component of the Library project are Parent Cafés, which are designed to strengthen the whole family. Parent Cafés consist of monthly meetings at participating libraries throughout the County and serve as a forum for parents to meet and discuss caretaking concerns, find solutions to problems and resolve difficult family issues.

For more information contact Muriel Cormier at mcormier@dmh.lacounty.gov.

Flex Funds Quiz

- 1.) Flex Funds should be tied to the clients:
 - A. Treatment plan
 - B. Behavior
 - C. Belt



- 2.) Flex funds should be used as stepping stones towards the family:
 - A. Paying off their bills
 - B. Achieving self-sufficiency
 - C. Helping other family members
- 3.) Flex funds can be used for small reinforcers, but not as incentives to build rapport?

 True False
- 4.) The number of provider locations included on each invoice should be no more than:

 One Two Three

ANSWERS

- 1. A. Use of flex funds must be tied to the child's unique CCP.
- 2. B. Flex funds should be used to help families become self sufficient and self-sustainable.
- 3. True. Reinforcers should be small, inexpensive, and used for behavioral management directly linked to child's treatment plan.
- 4. One multiple provider locations on a single claim result in delayed processing.

DISENBOLLMENT DETAIL



Countywide Data Comparisons

DISENROLLMENT

SHIMMARY

	FY 2011-12	DETAIL	SUMMARY		DISENKOLLIVIENT DETAIL		
Countywide MHSA Program Administration collects several data elements pertaining to total number of clients served, the number of children enrolled in a FSP that met their treatment goals, the average length of time a child stays in an FSP program, etc.		Total Clients served	Total Dis- enrolled	% That Met Goals	Avg. Months Enrolled	Clients 16+	Clients Enrolled 2+ Years
	SA 1	86	39	41%	14	2	6
	SA 2	408	181	63%	12	24	23
	SA 3	383	184	54%	17	35	41
	SA 4	390	135	58%	13	12	20
These data elements are used to analyze various aspects of program performance, effectiveness and client flow.	SA 5	42	17	76%	10	6	0
	SA 6	455	198	62%	16	18	35
The table to the right reflects a com-	SA 7	326	160	38%	11	21	13
parison between the Countywide aver-	SA 8	317	145	57%	19	26	56
age and each Service Area's aggregate data.	Countywide Comparison	2407	1059	55%	14	144	194

CLIENT

DETAIL